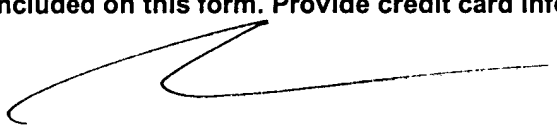



<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>					Docket No. <b>BFE-5356 (112713-753)</b>	
Applicant(s): <b>Whitehouse, A., et al.</b> <span style="float: right;">MAY 04 2005</span>						
Application No. <b>10/087,563</b>	Filing Date <b>February 28, 2002</b>	Examiner <b>Christopher R. Harmon</b>	Customer No. <b>29200</b>	Group Art Unit <b>3721</b>	Confirmation No. <b>5126</b>	
Invention: <b>SYSTEM TO FORM, FILL AND SEAL FLEXIBLE BAGS</b>						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
<b>CLAIMS AS AMENDED</b>						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	23 -	35 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	2 -	5 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>	
<div style="display: flex; flex-direction: row;"><div style="flex: 1;"><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>02-1818</b></p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p style="margin-left: 20px;"><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p><p><input type="checkbox"/> Payment by credit card. Form PTO-2038.</p><p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p><div style="margin-top: 20px;"> _____ Signature</div></div><div style="flex: 0.5; text-align: right; padding-right: 10px;"><p>Dated: <b>May 2, 2005</b></p></div></div>						
<div style="display: flex; justify-content: space-between;"><div style="width: 45%;"><p><b>Robert M. Barrett (Reg. No. 30,142)</b> <b>Bell, Boyd &amp; Lloyd LLC</b> <b>P.O. Box 1135</b> <b>Chicago, Illinois 60690-1135</b> <b>Tel: (312) 807-4204</b></p></div><div style="width: 50%; border: 1px solid black; padding: 5px;"><p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</p><p style="text-align: center;"><u>5/2/2005</u> (Date)</p><div style="text-align: center; margin-top: 20px;"> _____ Signature of Person Mailing Correspondence</div><p style="text-align: center;"><b>Heather Foster</b></p><p style="text-align: center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p></div></div>						
cc:						



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Alberto Siccardi  
Appl. No.: 10/087,563  
Conf. No.: 5126  
Filed: February 28, 2002  
Title: SYSTEM TO FORM, FILL AND SEAL FLEXIBLE BAGS  
Art Unit: 3721  
Examiner: Christopher R. Harmon  
Docket No.: BFE-5356 (112713-753)

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT**

Sir:

In response to the Office Action dated February 4, 2005, please amend the above-identified patent application as follows:

**A listing of the claims** is set forth on page 2 of this paper.

**Remarks** begin on page 6 of this paper.